

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 4	
<b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>							
<b>2. Contract No.</b> DAAE07-99-D-T024		<b>3. Award/Effective Date</b> 2003NOV10		<b>4. Order Number</b> 0016		<b>5. Solicitation Number</b>	
<b>6. Solicitation Issue Date</b>							
<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> JOHN DENYS		<b>B. Telephone Number (No Collect Calls)</b> (586) 574-6580		<b>8. Offer Due Date/Local Time</b>	
<b>9. Issued By</b> TACOM WARREN BLDG 231 AMSTA-AQ-ATAC WARREN, MICHIGAN 48397-5000  HTTP://CONTRACTING.TACOM.ARMY.MIL  <b>e-mail:</b> DENYSJ@TACOM.ARMY.MIL		<b>10. This Acquisition Is</b> <input type="checkbox"/> Unrestricted <input checked="" type="checkbox"/> Set Aside:      % For <input checked="" type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A)  <b>SIC:</b> <b>Size Standard:</b>		<b>11. Delivery For FOB Destination Unless Block Is Marked</b>		<b>12. Discount Terms</b> NET 30 DAYS	
				<input checked="" type="checkbox"/> See Schedule			
				<input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)			
				<b>13b. Rating</b> DOA4			
				<b>14. Method Of Solicitation</b>			
<input type="checkbox"/> RFQ		<input type="checkbox"/> IFB		<input type="checkbox"/> RFP			
<b>15. Deliver To</b> SEE SCHEDULE		<b>Code</b>		<b>16. Administered By</b> DCMA DETROIT U.S. ARMY TANK & AUTOMOTIVE COMMAND (TACOM) ATTN: DCMAE-GJD WARREN, MI 48397-5000			
<b>Code</b>				<b>Code</b> S2305A			
<b>Telephone No.</b>							
<b>17. Contractor/Offeror</b> GMA COVER CORP 1314 CEDAR ST. PORT HURON, MI. 48060-6119		<b>Code</b> 0V8C5 <b>Facility</b>		<b>18a. Payment Will Be Made By</b> DFAS - COLUMBUS CENTER DFAS-CO/NORTH ENTITLEMENT OPERATION P.O. BOX 182266 COLUMBUS OH 43218-2266			
<b>Code</b>				<b>Code</b> HQ0337			
<b>Telephone No.</b>							
<input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer				<b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum			
<b>19. Item No.</b>		<b>20. Schedule Of Supplies/Services</b>		<b>21. Quantity</b>		<b>22. Unit</b>	
		SEE SCHEDULE					
		(Attach Additional Sheets As Necessary)					
<b>25. Accounting And Appropriation Data</b> ACRN: AA 97 X4930AC6D 6D 26FB S20113 W56HZV				<b>26. Total Award Amount (For Govt. Use Only)</b> \$327,360.04			
<input type="checkbox"/> 27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.				<input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.			
<input checked="" type="checkbox"/> 27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda				<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.			
<b>28. Contractor Is Required To Sign This Document And Return _____ Copies</b> <input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.				<b>29. Award Of Contract: Reference _____ Offer</b> <input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b>			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> MARIE T. GAPINSKI /SIGNED/ GAPINSKM@TACOM.ARMY.MIL (586) 574-5333		<b>31c. Date Signed</b>	
<b>32a. Quantity In Column 21 Has Been</b>  <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted				<b>33. Ship Number</b>  <input type="checkbox"/> Partial <input type="checkbox"/> Final		<b>34. Voucher Number</b>	
<b>32b. Signature Of Authorized Government Representative</b>		<b>32c. Date</b>		<b>36. Payment</b> <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final		<b>37. Check Number</b>	
				<b>38. S/R Account Number</b>		<b>39. S/R Voucher Number</b>	
				<b>40. Paid By</b>			
<b>41a. I Certify This Account Is Correct And Proper For Payment</b>				<b>42a. Received By (Print)</b>			
<b>41b. Signature And Title Of Certifying Officer</b>		<b>41c. Date</b>		<b>42b. Received At (Location)</b>			
				<b>42c. Date Recd (YYMMDD)</b>		<b>42d. Total Containers</b>	

Name of Offeror or Contractor: GMA COVER CORP

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	NSN: 2540-01-434-8600 FSCM: 0V8C5 PART NR: GMA'S P/N 53273 SECURITY CLASS: Unclassified				
0001AA	<p><u>FIFTH ORDERING YEAR</u></p> <p>NOUN: COVER, FITTED, VEHICU PRON: EH43S393EH PRON AMD: 01 ACRN: AA AMS CD: 070011</p> <p><u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: SPI AK14348600, DATED 96 DEC 11 LEVEL PRESERVATION: Military LEVEL PACKING: A</p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W56HZV3303T903 W25G1U J 2 <u>DEL REL CD QUANTITY DAYS AFTER AWARD</u> 001 378 0210  002 378 0240  003 146 0270</p> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE07-99-D-T024/0016</p> <p>DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 002 W56HZV3303T904 W62G2T J 2 <u>DEL REL CD QUANTITY DAYS AFTER AWARD</u> 001 212 0270</p> <p>FOB POINT: Origin</p>	1114	KT	\$ 293.86000	\$ 327,360.04

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ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<div>SHIP TO: <u>FREIGHT ADDRESS</u></div> <div>(W62G2T) XU DEF DIST DEPOT SAN JOAQUIN</div> <div>25600 S CHRISMAN ROAD</div> <div>REC WHSE 10 PH 209 839 4307</div> <div>TRACY CA 95376-5000</div> <div><u>CONTRACT/DELIVERY ORDER NUMBER</u></div> <div>DAAE07-99-D-T024/0016</div>				

Name of Offeror or Contractor: GMA COVER CORP

CONTRACT ADMINISTRATION DATA

PRON/								JOB			
LINE	AMS CD/	OBLG						ORDER	ACCOUNTING	OBLIGATED	
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>	
0001AA	EH43S393EH	AA	2	97	X4930AC6D 6D	26FB	S20113		W56HZV	\$	327,360.04
	070011										
									TOTAL	\$	327,360.04

SERVICE								ACCOUNTING		OBLIGATED	
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>						<u>STATION</u>	<u>AMOUNT</u>		
Army	AA	97	X4930AC6D 6D	26FB	S20113			W56HZV	\$	327,360.04	
									TOTAL	\$	327,360.04